

REJECTION NOTICE - ADMINISTRATIVE REMEDY

DATE: MARCH 18, 2022

FCI BENNETTSVILLE  
Warden's Office  
APR 12 2022  
Date Received

FROM: ADMINISTRATIVE REMEDY COORDINATOR  
CENTRAL OFFICE

TO : DENEIL TENASHEL CAMPBELL, 50419-018  
BENNETTSVILLE FCI UNT: UNIT B QTR: B21-119L  
696 MUCKERMAN ROAD  
BENNETTSVILLE, SC 29512

FOR THE REASONS LISTED BELOW, THIS CENTRAL OFFICE APPEAL  
IS BEING REJECTED AND RETURNED TO YOU. YOU SHOULD INCLUDE A COPY  
OF THIS NOTICE WITH ANY FUTURE CORRESPONDENCE REGARDING THE REJECTION.

REMEDY ID : 1068550-A2 CENTRAL OFFICE APPEAL  
DATE RECEIVED : MARCH 3, 2022  
SUBJECT 1 : DHO APPEAL - COMBINED (PROCEDURES, EVIDENCE & SANCTIONS)  
SUBJECT 2 :  
INCIDENT RPT NO: 3455750

REJECT REASON 1: YOU SUBMITTED YOUR REQUEST OR APPEAL TO THE  
WRONG LEVEL. YOU SHOULD HAVE FILED AT THE  
~~INSTITUTION~~, REGIONAL OFFICE, ~~OR CENTRAL~~  
OFFICE LEVEL.

REJECT REASON 2: SEE REMARKS.

REMARKS : NO RECORD IN SENTRY OF YOUR APPEALING IR 3455750,  
FOR CODE 104 AT THE REGIONAL LEVEL.

U.S. Department of Justice

## Central Office Administrative Remedy Appeal

Federal Bureau of Prisons

Type or use ball-point pen. If attachments are needed, submit four copies. One copy each of the completed BP-229(13) and BP-230(13), including any attachments must be submitted with this appeal.

From: Denzil - Campbell 30419019 B-2 FBI - BENNETTSVILLE  
 LAST NAME, FIRST, MIDDLE INITIAL REG. NO. UNIT INSTITUTION

## Part A - REASON FOR APPEAL

I AM WRITTING THIS BECAUSE I HAVE SENT ALL MY GRIEVENCE'S TO REGION, FOR OVER 2 1/2 MONTHS I DIDN'T GET A RESPONSE. I BELIEVE STAFF PLANTED A KNIFE IN MY CELL. I WROTE UP THE LT. AND SINCE THEN STAFF HAS BEEN RETALIATING AGAINST ME. I HAVE BEEN TARGETED, AND RETALIATED AGAINST BY STAFF FROM BENNETTSVILLE F.C.I. SINCE THE BEGINNING OF THE PANDEMIC I'VE BEEN HAVING SYMPTOMS OF THE VIRUS SUCH AS VOMITTING BLOOD, DIARRHEA, NAUSEA, AND SEVERE HEADACHES WHEN I PRESSED THE EMERGENCY button ON NOV. 28, 2020 AT 4:00 A.M. AND WAS BROUGHT TO LT. BATES WHEN HE TOLD ME TO GO BACK TO THE UNIT AND DRINK WATER, BECAUSE HE WASN'T SENDING ANYONE OUT FOR COVID, AND WAS TOLD TO STAY IN MY CELL UNTIL I WAS BETTER. SOON AFTER I WROTE UP LT. BATES FOR DENYING ME MEDICAL HELP. 5 DAYS LATER MY CELL WAS SEARCHED, AND THEY CAME BACK WITH A PLANTED KNIFE BECAUSE IT WAS NOT SOMETHING I WOULD HAVE. I ACCEPTED THE SHOT BECAUSE OF STAFF RETALIATIONS. I WROTE REGION TO NOTIFY THEM OF MY SITUATION - SEE ATTACHED

2-14-2022  
DATE

[Signature]  
SIGNATURE OF REQUESTER

## Part B - RESPONSE

IR # 3455750 ✓

code 104

hearing # 12-16-2020

RECEIVED  
MAR 03 2022

Administrative  
Federal Bureau of Prisons

DATE

GENERAL COUNSEL

ORIGINAL: RETURN TO INMATE

CASE NUMBER: 1068550-A2

## Part C - RECEIPT

CASE NUMBER: \_\_\_\_\_

Return to: \_\_\_\_\_  
LAST NAME, FIRST, MIDDLE INITIAL

REG. NO.

UNIT

INSTITUTION

SUBJECT: \_\_\_\_\_

DATE

SIGNATURE OF RECIPIENT OF CENTRAL OFFICE APPEAL

UPN LVN



PRINTED ON RECYCLED PAPER

BP-231(13)  
JUNE 2002

I was writing (SENSITIVE). That was returned to me in SPECIAL Housing unit which staff told me to come to them first. I had shown proof of RETALIATION towards me over medical treatment, they don't want REGION to know that they ARE using STRATEGIC, MANIPULATIVE tactics to further DENY me medical ATTENTION, while in SPECIAL Housing UNIT I spoke to WARDEN BARNES, CAPTAIN ABDELAZIZ, SITS, GARNES, Lt. DAVIS, and unit manager DAVIS and still didn't get A RESPONSE. I ALSO BELIEVE I HAVE HYPOLAR. I NEED to be REMOVED from this COMPOUND, somewhere that CAN ACCOMODATE my medical NEEDS.

~~I am just~~ and I also need my 41 Days returned to me because if the incident report is not valid all sanctions are supposed to be lifted and I also have proof of further retaliation by the staff at bennettsville F.C.I., I have asked counselor/unit manager for a copy of my incident report and he told me where he could see where I got sanctioned but he could not see a report written by staff on the same incident report, which is manipulatory tactics and staff misconduct and I also have a copy of the "said" incident to show that it has been tampered with. I also wrote the region and they have NOT sent me back a response and that is the reason I don't have the original evidence to present to you now because the region is holding on to them. I also have my tracking number to show that I sent it certified to the region. NEED HELP PLEASE

THANK YOU



UNICOR FEDERAL PRISON INDUSTRIES, INC.  
LEAVENWORTH, KANSASU.S. Department of Justice  
Federal Bureau of Prisons

Sensitive

## Regional Administrative Remedy Appeal

Type or use ball-point pen. If attachments are needed, submit four copies. One copy of the completed BP-229(13) including any attachments must be submitted with this appeal.

From: Deneil - Campbell 50419-018 B-2 FCI-Bennettville  
 LAST NAME, FIRST, MIDDLE INITIAL REG. NO. UNIT INSTITUTION

Part A - REASON FOR APPEAL Retaliation - I am writing this to show that I am targeted and I have been retaliated on by senior and lower level members of staff from Bennettville FCI. From the beginning of the Covid-19 pandemic I have been showing all symptoms of the virus as far as vomiting blood, diarrhea, nausea, and severe headaches. I have pressed the emergency button on Nov. 28<sup>th</sup> 2020 at 4:00 a.m. and I was brought to L.T. Bates whom told me to go back to the unit and drink water because he wasn't sending no one out for Covid-19 at Bennettville FCI and I need to stay in my cell until I get better. Soon after I wrote up L.T. Bates for him of denying me medical attention and 5 days after my cell was searched and a knife was placed there. I was placed in special Housing Unit. The only reason I took the charge is because of fear of staff retaliation. I wrote the region to get them aware of my situation that I'm being targeted by staff. The BP-10 I wrote to the region was tampered with by staff, with staff taking my letter (which has a United States Postal stamp) to the region.

12-9-221  
DATE

D Campbell  
SIGNATURE OF REQUESTER

See Attach

## Part B - RESPONSE

DATE

If dissatisfied with this response, you may appeal to the General Counsel. Your appeal must be received in the General Counsel's Office within 30 calendar days of the date of this response.

ORIGINAL: RETURN TO INMATE

CASE NUMBER: \_\_\_\_\_

## Part C - RECEIPT

CASE NUMBER: \_\_\_\_\_

Return to: \_\_\_\_\_  
 LAST NAME, FIRST, MIDDLE INITIAL REG. NO. UNIT INSTITUTION

B-P-10

REGIONAL DIRECTOR

## Attachment

that was writing (Sensitive). That was returned to me in Special Housing Unit which staff told me to come to them first. And that shows proof of retaliation towards me over medical treatment because they don't want region to know that they are using strategic manipulatory tactics to further deny me medical attention. While in Special Housing Unit I spoke to warden Barnes, Captain Abdelaziz, S.I.S. Gomes, L.T., and unit manager Davis, and still didn't get no response or help from anyone. As we speak I been going through a medical emergency. I think I have H-purkar. I need to get removed from this compound and go to another compound that can accomodate me some medical help. Please and thank you.



BP-A0288

**INCIDENT REPORT**

Dept. of Justice / Federal Bureau of Prisons

**Part I - Incident Report**

1. Institution: <b>BENNETTSVILLE FCI</b>		Incident Report Number: <b>3455750</b>	
2. Inmate's Name <b>CAMPBELL, DENEIL</b>	3. Register Number <b>50419-018</b>	4. Date of Incident <b>12-05-2020</b>	5. Time <b>1330 hrs</b>
6. Place of Incident	7. Assignment	8. Unit	
9. Incident		10. Prohibited Act Code(s) <b>104</b>	

## 11. Description Of Incident

(Date: \_\_\_\_\_ Time: \_\_\_\_\_ staff became aware of incident)

12. Typed Name/Signature of Reporting Employee		13. Date And Time <b>12-05-2020 1430 hrs</b>	
14. Incident Report Delivered to Above Inmate By (Type Name/Signature)	15. Date Report Delivered _____	16. Time Report Delivered _____	

The Government Paperwork Elimination Act (GPEA) of 1998 authorized Federal Agencies the use of electronic forms, electronic filing, and electronic signatures to conduct office business.



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*Campbell, D. 80419-0108*

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Sent To

*Regional - Director* C. 29512

Street and Apt. No., or PO Box No.

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City, State, ZIP+4<sup>®</sup>

*Atlanta GA 30331 BID-2200*

Form 3800, April 2015 PSN 7530-02-001-9047

See Reverse for Instructions